



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 4802

|  |   |  |                               |  |                           |                                |
|--|---|--|-------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/777,444   | <b>FILING or 371(c)<br/>DATE</b><br>02/11/2004<br><b>RULE</b>   | <b>CLASS</b><br>604                                      | <b>GROUP ART UNIT</b><br>1615 | <b>ATTORNEY DOCKET NO.</b><br>050623.01192                   |                           |                                |
| <b>APPLICANTS</b><br>Vinayak D. Bhat, Sunnyvale, CA;<br><b>** CONTINUING DATA *****</b><br>This application is a DIV of 09/475,649 12/30/1999 PAT 6,706,034<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/13/2004      |   |  |                               |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/Carlos A. Azpuru /</u><br>Examiner's Signature |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWINGS</b><br>6                                  | <b>TOTAL CLAIMS</b><br>47 | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>SQUIRE, SANDERS & DEMPSEY LLP<br>1 MARITIME PLAZA<br>SUITE 300<br>SAN FRANCISCO, CA 94111<br>UNITED STATES   |   |  |                               |  |                           |                                |
| <b>TITLE</b><br>Process for agent retention in biological tissues  |   |  |                               |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1514   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                               | <input type="checkbox"/> All Fees                            |                           |                                |
|  |   |  |                               | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|  |   |  |                               | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|  |   |  |                               | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|  |   |  |                               | <input type="checkbox"/> Other _____                         |                           |                                |
|  |   |  |                               | <input type="checkbox"/> Credit                              |                           |                                |